

**UNITED STATES PATENT & TRADEMARK OFFICE**  
Washington, D.C. 20231

**REQUEST FOR PATENT FEE REFUND**

1 Date of Request: 5-12-08      2 Serial/Patent # 09/964,916

3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT
<input type="checkbox"/>	Filing			\$
<input type="checkbox"/>	Amendment			\$
<input checked="" type="checkbox"/>	Extension of Time		8-8-07	\$ 1,020
<input type="checkbox"/>	Notice of Appeal/Appeal			\$
<input type="checkbox"/>	Petition			\$
<input type="checkbox"/>	Issue			\$
<input type="checkbox"/>	Cert of Correction/Terminal Disc.			\$
<input type="checkbox"/>	Maintenance			\$
<input type="checkbox"/>	Assignment			\$
<input type="checkbox"/>	Other			\$

	7 TOTAL AMOUNT OF REFUND	\$ 1,020
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8 TO BE REFUNDED BY:								
<input type="checkbox"/>	Treasury Check							
<input checked="" type="checkbox"/>	Credit Deposit A/C #:							
	9 <table border="1"><tr><td>5</td><td>0</td><td>--</td><td>1</td><td>1</td><td>7</td><td>0</td></tr></table>	5	0	--	1	1	7	0
5	0	--	1	1	7	0		

10 REASON: No extension of time fee due. Paid after maximum extendable time period.

11 REFUND REQUESTED BY:

TYPED/PRINTED NAME: <u>Kimberly Inabinet</u>	TITLE: <u>Petitions Examiner</u>
SIGNATURE: <u>Kimberly Inabinet</u>	PHONE: <u>x24618</u>
OFFICE: <u>Office of Petitions</u>	

\*\*\*\*\* THIS SPACE RESERVED FOR FINANCE USE ONLY: \*\*\*\*\*

APPROVED: [Signature]      DATE: 6/5/08

*Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:*

**Office of Finance  
Refund Branch  
Crystal Park One, Room 802B**